



RECEIVED  
CENTRAL FAX CENTER  
MAY 23 2005

UNITED STATES | ENGLAND | GERMANY | CHINA

**FACSIMILE TRANSMISSION**

FROM: Terrie Quillin

TELEPHONE: 303/447-7741

EMAIL: tquillin@faegre.com

DATE: May 23, 2005

TIME:

NUMBER OF PAGES (including this page):

F&amp;B FILE: 301389

REC: 8638

TO: USPTO - Central Number

TELEPHONE:

FAX: 703-872-9306

**MESSAGE**

RECEIVED  
MAY 24 2005  
CIPE/JCWS

IF YOU DO NOT RECEIVE ALL PAGES, PLEASE CALL OFFICE SERVICES AT 303.447.7900 OR  
TERRIE QUILLIN AT 303/447-7741.

THIS TELECOPY IS INTENDED ONLY FOR THE USE OF THE PERSON TO WHOM IT IS ADDRESSED, AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL AND EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IF YOU ARE NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION, OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

1900 FIFTEENTH STREET | BOULDER COLORADO 80302-5414

TELEPHONE 303-447-7700 | FACSIMILE 303-447-7800 | WWW.FAEGRE.COM

PTO/SB/21 (09-04)

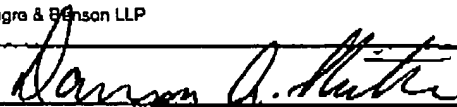
Approved for use through 07/31/2008, OMB 0851-0031


U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/855,103	
	Filing Date	05/14/2001	
	First Named Inventor	Lee Goodman	
	Art Unit	2661	
	Examiner Name	Pizarro, Ricardo M.	
Total Number of Pages in This Submission	15	Attorney Docket Number	74120-301389

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Transmission Under 37 CFR 1.8 (1p); Credit Card Payment Form PTO-2038 (1p)
<div style="border: 1px solid black; padding: 2px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Faugra & Benson LLP		
Signature			
Printed Name	Damon A. Rieth		
Date	May 23, 2005	Reg. No.	62,167

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Terrie Quillen	Date	May 23, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/97 (03-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

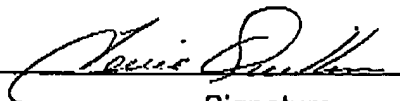
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorney Docket No.: 301389

## Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile  
transmitted to the United States Patent and Trademark Office

on May 23, 2005  
Date



Signature

Terrie Quillin

Typed or printed name of person signing Certificate

Registration Number if applicable

303-447-7741

Telephone Number

Note: Each paper must have its own certificate of transmission, or this  
certificate must identify each submitted paper.

Fax Transmittal Sheet	1 page
Transmittal Form	1 page
Certificate of Fax Transmission Under 37 CFR 1.8	1 page
Petition for Extension of Time Under 37 CFR 1.136(a)	1 page
Fee Transmittal for FY 2005	1 page
Credit Card Payment Form PTO-2038	1 page
Amendments and Response to Office Action	9 pages

This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL  
for FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ ) 450**Complete if Known**

Application Number	09/855,103
Filing Date	05/14/2001
First Named Inventor	Lee Goodman
Examiner Name	Pizarro, Ricardo M.
Art Unit	2661
Attorney Docket No.	74120-301388

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : \_\_\_\_\_  
☒ Deposit Account Deposit Account Number: 06-0029 Deposit Account Name: Faegre & Benson LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES**

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 30 (including Reissues)	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
_____ -20 or HP= _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
_____ - 3 or HP= _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

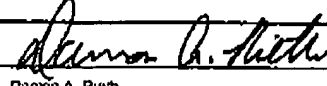
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
_____ - 100 = _____	/ 50 = _____	(round up to a whole number) x		

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Two Month Time Extension

**Fees Paid (\$)****\$450****SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	52,167	Telephone	303-447-7729
Name (Print/Type)	Damon A. Rieph			Date	May 23, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-788-9199) and select option 2.

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

<b>Applicant:</b> Lee Goodman	<b>Examiner:</b> Pizarro, Ricardo M.	<b>RECEIVED</b>
<b>App. No.:</b> 09/855,103	<b>Group Art Unit:</b> 2661	<b>CENTRAL FAX CENTER</b>
<b>Filed:</b> May 14, 2001	<b>Conf. No.:</b> 8743	<b>MAY 23 2005</b>
<b>For:</b> SERVICE LEVEL AGREEMENTS BASED ON OBJECTIVE VOICE QUALITY TESTING FOR VOICE OVER IP (VOIP) NETWORKS	<b>Docket No.:</b> 74120-301389	

Mail Stop Amendment  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

## AMENDMENTS AND RESPONSE TO OFFICE ACTION

Sir:

In response to the Office Action mailed December 21, 2004, the Applicant respectfully requests the Examiner to enter the following amendment and to consider the following remarks:

**Amendments to the Specification** begin on page 2 of this paper.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 3 of this paper.

**Remark** begins on page 6 of this paper.